

SEP 15 2006

Docket No.

124854

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

Applicant(s): Cameron Brackett, et al

Application No.

10/065,466

Filing Date

10/22/2002

Examiner

Joseph T. Pan

Group Art Unit

2135

Invention: METHOD, SYSTEM, COMPUTER PRODUCT AND ENCODING FORMAT FOR CREATING
ANONYMITY IN COLLECTING PATIENT DATA

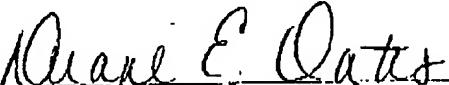
I hereby certify that this Petition for Extension of Time, Amendment Transmittal Letter, Response to Office
(Identify type of correspondence) Action dated 3/15/06

is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 571-273-8300).

on September 15, 2006
(Date)

Diane E. Oates

(Typed or Printed Name of Person Signing Certificate)


(Signature)

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P10/RCV02

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 124854	
Applicant(s): Cameron Brackett, et al					
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/065,466	10/22/2002	Joseph T. Pan	23413	2135	5645
Invention: METHOD, SYSTEM, COMPUTER PRODUCT AND ENCODING FORMAT FOR CREATING ANONYMITY IN COLLECTING PATIENT DATA					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	25 -	25 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	5 -	5 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 07-0845</p> <p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038.</p>					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 <i>Signature</i>					
Dated: 9/15/06					
<p>Anne Davis Barry Reg. No. 47,408 Cantor Colburn LLP 55 Griffin Road South Bloomfield, CT 06002 (860) 286-2929</p>					
<p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____</p> <p style="text-align: center;">(Date)</p>					
<i>Signature of Person Mailing Correspondence</i>					
<i>Typed or Printed Name of Person Mailing Correspondence</i>					
P11LARGO/REV10					